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## Provisions Immediately Enacted in the Bill

*Below are some of the key provisions of the health insurance reform bill that will take effect immediately*

### Enacted Immediately

#### **SMALL BUSINESS TAX CREDITS:**

Offers tax credits to small businesses to make employee coverage more affordable. Tax credits of up to 35 percent of premiums will be immediately available to firms that choose to offer coverage. (Beginning in 2014, the small business tax credits will cover 50 percent of premiums.)

#### **BEGINS TO CLOSE THE MEDICARE PART D DONUT HOLE:**

Provides a \$250 rebate to Medicare beneficiaries who hit the donut hole in 2010.

### Effective 90 Days After Enactment

#### **HELP FOR EARLY RETIREES:**

Creates a temporary re-insurance program (until the Exchanges are available) to help offset the costs of expensive health claims for employers that provide health benefits for retirees age 55-64.

#### **IMMEDIATE HELP FOR THE UNINSURED UNTIL EXCHANGE IS AVAILABLE (INTERIM HIGH-RISK POOL):**

Provides immediate access to insurance for Americans who are uninsured because of a pre-existing condition - through a temporary high-risk pool.

### Effective 6 Months After Enactment

#### **ENDS RESCISSIONS:**

Bans insurance companies from dropping people from coverage when they get sick.

#### **NO DISCRIMINATION AGAINST CHILDREN WITH PRE-EXISTING CONDITIONS:**

Prohibits health insurers from denying coverage to children with pre-existing conditions. (Beginning in 2014, this prohibition would apply to all persons.)

#### **BANS LIFETIME LIMITS ON COVERAGE:**

Prohibits health insurance companies from placing lifetime caps on coverage.

#### **BANS RESTRICTIVE ANNUAL LIMITS ON COVERAGE:**

Tightly restricts new plans' use of annual limits to ensure access to needed care. (Beginning in 2014, the use of any annual limits would be prohibited for all plans.)

**FREE PREVENTIVE CARE UNDER NEW PRIVATE PLANS:**

Requires new private plans to cover preventive services with no co-payments and with preventive services being exempt from deductibles. (Beginning in 2018, this requirement applies to all plans.)

**NEW, INDEPENDENT APPEALS PROCESS:**

Ensures consumers in new plans have access to an effective internal and external appeals process to appeal decisions by their health insurance plan.

**EXTENDS COVERAGE FOR YOUNG PEOPLE UP TO 26TH BIRTHDAY THROUGH PARENTS' INSURANCE:**

Requires health plans to allow young people up to their 26th birthday to remain on their parents' insurance policy, at the parents' choice.

**PROHIBITING DISCRIMINATION BASED ON SALARY:**

Prohibits new group health plans from establishing any eligibility rules for health care coverage that have the effect of discriminating in favor of higher wage employees.

**Effective on or before October 1, 2010****COMMUNITY HEALTH CENTERS:**

Increases funding for Community Health Centers to allow for nearly a doubling of the number of patients seen by the centers over the next 5 years. *Effective beginning in fiscal year 2011.*

**INCREASING NUMBER OF PRIMARY CARE DOCTORS:**

Provides new investment in training programs to increase the number of primary care doctors, nurses, and public health professionals. *Effective in fiscal year 2010.*

**HEALTH INSURANCE CONSUMER INFORMATION:**

Provides aid to states in establishing offices of health insurance consumer assistance in order to help individuals with the filing of complaints and appeals. *Effective in FY 2010.*

**Effective January 1, 2011****ENSURING VALUE FOR PREMIUM PAYMENTS:**

Requires plans in the individual and small group market to spend 80 percent of premium dollars on medical services, and plans in the large group market to spend 85 percent. Insurers that do not meet these thresholds must provide rebates to policyholders.

**CREATES NEW, VOLUNTARY, PUBLIC LONG-TERM CARE INSURANCE PROGRAM:**

Creates a long-term care insurance program to be financed by voluntary payroll deductions to provide benefits to adults who become functionally disabled.

**FREE PREVENTIVE CARE UNDER MEDICARE:**

Eliminates co-payments for preventive services and exempts preventive services from deductibles under the Medicare program.

**MEDICARE PART D DRUG PRICE REDUCTION:**

Drug companies would provide a 50% discount on brand name prescription drugs for seniors who face a gap in drug coverage. More subsidies would be phased in through 2020, when the coverage gap would be closed.

**RURAL PRIMARY CARE ENHANCEMENTS:**

Primary care doctors and general surgeons practicing in areas that lack primary care doctors would receive a 10% bonus payment under Medicare.